Official Form 1 (4/07)										
Ur	nited S Nort	States thern l	Bank District	ruptcy (of Indian	Court a				Voluntar	Petition
Name of Debtor (if individual, enter L. Beagles, Judith Ellen	ast, First,	Middle):			Name	of Joint I	Debtor (Spouse	e) (Last, First	, Middle):	
All Other Names used by the Debtor in (include married, maiden, and trade nar		years					es used by the d, maiden, and		in the last 8 years):	
Last four digits of Soc. Sec./Complete 1	EIN or oth	ner Tax I	D No. (if mo	ore than one, state	all) Last f	our digits	of Soc. Sec./C	Complete EIN	or other Tax ID No.	if more than one, state al
Street Address of Debtor (No. and Street 55922 Buckeye Road	et, City, a	nd State)	:		Street	Address	of Joint Debto	r (No. and Str	reet, City, and State):	
Mishawaka, IN			Г	ZIP Code 46545						ZIP Code
County of Residence or of the Principa St Joseph	l Place of	Business	s:		Count	ty of Resid	dence or of the	Principal Pla	ace of Business:	
Mailing Address of Debtor (if different	from stre	et addres	ss):		Mailiı	ng Addres	s of Joint Deb	tor (if differe	nt from street address):
			Г	ZIP Code	4					ZIP Code
Location of Principal Assets of Busines (if different from street address above):					<u> </u>					
Type of Debtor (Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form □ Corporation (includes LLC and LLI □ Partnership □ Other (If debtor is not one of the above check this box and state type of entity be	P) entities,	Sing in I Rail Stoo	Ith Care Bugle Asset Roll U.S.C. § road ekbroker amodity Bruring Banker Tax-Exe (Check box tor is a tax-er Title 26 of the Asset Roll of	eal Estate as o 101 (51B)	nization States	defin "incu	the pter 7 pter 9 pter 11 pter 12	Petition is Fi Cl of Cl of Cl of Nature (Checl consumer debts, § 101(8) as ridual primarily	bus.	Recognition eeding Recognition
Filing Fee (Full Filing Fee attached Filing Fee to be paid in installments attach signed application for the cois unable to pay fee except in instal Filing Fee waiver requested (applic attach signed application for the co	s (applicat urt's consi lments. Ru able to ch	ole to ind deration ale 1006 apter 7 in	certifying t (b). See Offi ndividuals	that the debtoicial Form 3A.	Check	Debtor i c if: Debtor's to inside c all applic A plan i Accepta	s a small busing some a small busing some small busing saggregate no ers or affiliates cable boxes: s being filed wances of the pla	ncontingent 1) are less than with this petition were solici	s defined in 11 U.S.C. or as defined in 11 U.; or as defined in 11 U.; iquidated debts (exclus \$2,190,000.	S.C. § 101(51D). ding debts owed one or more
Statistical/Administrative Informatio ■ Debtor estimates that funds will be □ Debtor estimates that, after any exe there will be no funds available for	available mpt prope	erty is ex	cluded and	administrativ				1	S SPACE IS FOR COUR	
Estimated Number of Creditors 1- 50- 100- 49 99 199	200- 999	1000- 5,000	5001- 10,000	10,001- 25,000	25,001- 50,000	100,001 100,000				
Estimated Assets \$0 to \$10,000 \$100,000			0,001 to nillion		0,001 to million		More than S100 million			
Estimated Liabilities \$0 to			0,001 to		0,001 to		More than			

Case 07-32088-hcd Doc 1 Filed 08/15/07 Page 2 of 43

Official Form 1 (4/07) FORM B1, Page 2 Name of Debtor(s): **Voluntary Petition** Beagles, Judith Ellen (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: Northern District of Indiana 06-31538 10/19/06 Location Case Number: Date Filed: Where Filed: Northern District of Indiana 06-30163 3/10/06 Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Date Filed: Name of Debtor: Case Number: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10O) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Debra Voltz-Miller August 15, 2007 Signature of Attorney for Debtor(s) (Date) Debra Voltz-Miller 15590-71 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Official Form 1 (4/07) FORM B1, Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Judith Ellen Beagles

Signature of Debtor Judith Ellen Beagles

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

August 15, 2007

Date

Signature of Attorney

X /s/ Debra Voltz-Miller

Signature of Attorney for Debtor(s)

Debra Voltz-Miller 15590-71

Printed Name of Attorney for Debtor(s)

Debra Voltz-Miller & Associates

Firm Name

1951 E. Fox St. South Bend, IN 46613

Address

(574) 289-1709 Fax: (574) 289-1909

Telephone Number

August 15, 2007

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Beagles, Judith Ellen

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Indiana

In re	Judith Ellen Beagles		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling
requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:	/s/ Judith Ellen Beagles	
	Judith Ellen Beagles	

Date: August 15, 2007

Form 6-Summary (10/06)

United States Bankruptcy Court Northern District of Indiana

In re	Judith Ellen Beagles		Case No.	
_		Debtor		
			Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	140,000.00		
B - Personal Property	Yes	3	3,865.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		131,018.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		564.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		4,456.04	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			1,977.18
J - Current Expenditures of Individual Debtor(s)	Yes	1			500.00
Total Number of Sheets of ALL Schedu	ıles	15			
	To	otal Assets	143,865.00		
			Total Liabilities	136,038.04	

United States Bankruptcy Court Northern District of Indiana

In re	Judith Ellen Beagles		Case No		
		Debtor	,		
			Chapter	13	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	564.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	564.00

State the following:

Average Income (from Schedule I, Line 16)	1,977.18
Average Expenses (from Schedule J, Line 18)	500.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	927.18

State the following:

State the lone wing.		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	564.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		4,456.04
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		4,456.04

Form B6A (10/05)

In re	Judith Ellen Beagles	Case No.	
•		Dehtor	

SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and **Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Community Claim or Exemption

Personal Residence located at 55922 Buckeye Road, Mishawaka, IN 46545 Lot Numbered Twelve (12) as Shown on the Recorded Plat of East Jefferson Estates, Section 1, Recorded October 13th, 1975, in Plat Book 29, Page E.

> Sub-Total > 140,000.00 (Total of this page)

140,000.00

131,018.00

140,000.00 Total >

continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

Form B6B (10/05)

In re	Judith Ellen Beagles	Case No.	
-		Debtor ,	
		Debtor	

SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on Hand	-	15.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X		
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods including Appliances, Entertainment Equipment and Furniture	-	3,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Personal Clothing	-	250.00
7.	Furs and jewelry.	Rings and Costume Jewelry	-	600.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Term Life Insurance with Baltimore Life Insurance through Mishawaka Utilities	-	0.00
10.	Annuities. Itemize and name each issuer.	x		
		(Tota	Sub-Total of this page)	al > 3,865.00

2 continuation sheets attached to the Schedule of Personal Property

Form B6B (10/05)

In re	ludith Ellan Basslas	Casa No.
111 16	Judith Ellen Beagles	Case No

Debtor

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	Pensio	n with City of Mishawaka	-	0.00
Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
3. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
4. Interests in partnerships or joint ventures. Itemize.	X			
 Government and corporate bonds and other negotiable and nonnegotiable instruments. 	X			
6. Accounts receivable.	X			
7. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
9. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
 Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. 	X			
1. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			
			Sub-Tota	al > 0.00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

Form B6B (10/05)

In re	Judith Ellen Beagles	Case No.

Debtor

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	19	91 Mercury Topaz (Not Running)	-	0.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

Total > **3,865.00**

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

0.00

Form B6C (4/07)

In re	Judith Ellen Beagles	Case No.	

Debtor

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

SCHEDULE C.	PROPERTY CLAIMED A	S EXEMIP I	
Debtor claims the exemptions to which debtor is entitled u (Check one box) 11 U.S.C. §522(b)(2) 11 U.S.C. §522(b)(3)	nder: Check if debto \$136,875.	or claims a homestead exe	mption that exceeds
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property Personal Residence located at 55922 Buckeye Road, Mishawaka, IN 46545 Lot Numbered Twelve (12) as Shown on the Recorded Plat of East Jefferson Estates, Section 1, Recorded October 13th, 1975, in Plat Book 29, Page E.	Ind. Code § 34-55-10-2(c)(1)	15,000.00	140,000.00
<u>Cash on Hand</u> Cash on Hand	Ind. Code § 34-55-10-2(c)(3)	15.00	15.00
Household Goods and Furnishings Household Goods including Appliances, Entertainment Equipment and Furniture	Ind. Code § 34-55-10-2(c)(2)	3,000.00	3,000.00
Wearing Apparel Personal Clothing	Ind. Code § 34-55-10-2(c)(2)	250.00	250.00
Furs and Jewelry Rings and Costume Jewelry	Ind. Code § 34-55-10-2(c)(2)	600.00	600.00

Total: 18,865.00 143,865.00

Official Form 6D (10/06)

In re	Judith Ellen Beagles	Case No.	
-		, Debtor	

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Н	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	0 N T N G E	Q U I D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxx6488 HomEq P.O. Box 57621 Jacksonville, FL 32241		-	Mortgage Personal Residence located at 55922 Buckeye Road, Mishawaka, IN 46545 Lot Numbered Twelve (12) as Shown on the Recorded Plat of East Jefferson Estates, Section 1, Recorded October 13th, 1975, in Plat Book 29, Page E.	T 1	A T E D	x		
	_		Value \$ 140,000.00		4		130,000.00	0.00
Account No. Representing: HomEq			St. Joseph Superior Court Re: 71D07-0505-MF-383 101 S. Main Street South Bend, IN 46601					
			Value \$					
Account No. Representing: HomEq			Todd Belanger, Esq. 111 Monument Circle, Suite 3400 Indianapolis, IN 46204					
			Value \$					
Account No. SQxxxxxxxx/xxx8680 Indiana Department of Revenue Bankruptcy Section, Room N-203 100 N. Senate Avenue Indianapolis, IN 46204		-	Tax Lien Personal Residence located at 55922 Buckeye Road, Mishawaka, IN 46545 Lot Numbered Twelve (12) as Shown on the Recorded Plat of East Jefferson Estates, Section 1, Recorded October 13th, 1975, in Plat Book 29, Page E.			x		
			Value \$ 140,000.00				280.00	0.00
continuation sheets attached			S (Total of t	ubto nis pa			130,280.00	0.00

Official Form 6D (10/06) - Cont.

In re	Judith Ellen Beagles	Case No	
-		Debtor	

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

	_	_		-				
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	TOOXH_ZGWZ	DZ1-QD-DAH		AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. SQxxxxxxxx/xxx8680			Tax Lien	Т	E D			
Indiana Department of Revenue Bankruptcy Section, Room N-203 100 N. Senate Avenue Indianapolis, IN 46204		_	Personal Residence located at 55922 Buckeye Road, Mishawaka, IN 46545 Lot Numbered Twelve (12) as Shown on the Recorded Plat of East Jefferson Estates, Section 1, Recorded October 13th, 1975, in Plat Book 29, Page E.		<u> </u>	x		
			Value \$ 140,000.00	╙		Ш	156.00	0.00
Account No. xxDxx-xxxx-SC-x3217 NCO Financial Systems/55 P.O. Box 13570 Philadelphia, PA 19101		-	January 2005 Judgment Lien Personal Residence located at 55922 Buckeye Road, Mishawaka, IN 46545 Lot Numbered Twelve (12) as Shown on the Recorded Plat of East Jefferson Estates, Section 1, Recorded October 13th, 1975, in Plat Book 29, Page E.			x		
			Value \$ 140,000.00				582.00	0.00
Account No. Representing: NCO Financial Systems/55			St. Joseph Superior Court Re: 71D01-0410-SC-13217 101 S. Main Street South Bend, IN 46601					
Account No.			value 9					
			Value \$					
Account No.						П		
			Value \$					
Sheet of continuation sheets attac Schedule of Creditors Holding Secured Claims	he	d to	(Total of	Subt			738.00	0.00
			(Report on Summary of S	Т	ota	ıl	131,018.00	0.00

Official Form 6E (4/07)

T	Indiah Ellan Basalas	Corr No	
In re	Judith Ellen Beagles	Case No	
•		Debtor ,	

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

continuation sheet for each type of priority and label each with the type of priority.
The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do
so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also
include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).
If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate
schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be
liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the
column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled
"Disputed." (You may need to place an "X" in more than one of these three columns.)
Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled
"Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.
Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority
listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under
chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to
priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case
under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TWDES OF PRIORITY CLAIMS (CLAIMS AND
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of
such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trus
or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales
representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever
occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business,
whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered
provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
_
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal
Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

1 continuation sheets attached

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Official Form 6E (4/07) - Cont.

In re	Judith Ellen Beagles	Case No	
-	_	Debtor	

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, NLIQUIDATED ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) Account No. **Indiana Department of Revenue** 0.00 Bankruptcy Section, Room N-203 100 N. Senate Avenue X Indianapolis, IN 46204 564.00 564.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 564.00 564.00 0.00 (Report on Summary of Schedules) 564.00 564.00

Official Form 6F (10/06)

In re	Judith Ellen Beagles		Case No.	
-		Debtor		

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFINGENT	L Q D L	FUT	S J	AMOUNT OF CLAIM
Account No.			12/2005 Cash Advance	'	E			
Advance America 506 West McKinley Mishawaka, IN 46545		-				,	x	307.00
Account No. xxxxxxx1236		┢	6/2003	+	H	t	+	
Allied Physicians Surgery Center 53990 Carmichael Drive Suite 100 South Bend, IN 46635		-	Medical Services			,	×	180.00
Account No. Representing: Allied Physicians Surgery Center			CBCS P.O. Box 1615 Grand Rapids, MI 49501					
Account No. 6425A Cash In A Flash 501 W. McKinley Avenue Mishawaka, IN 46545		-	10/2005 Cash Advance			,	×	
		L				L		230.00
1 continuation sheets attached			(Total of t	Subt)	717.00

Official Form 6F (10/06) - Cont.

In re	Judith Ellen Beagles	Case No.	_
		Debtor ,	

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

					_		
CREDITOR'S NAME,		Hu	sband, Wife, Joint, or Community		U N	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDAT	U T E	AMOUNT OF CLAIM
Account No. 8523			6/2005	⊤ [T E D		
Kohl's c/o Bankruptcy Department P.O. Box 740933 Dallas, TX 75374		-	Credit Card Purchases		D	x	
							367.00
Account No. xx9556			6/2006				
Michiana Hematology-Oncology, PC P.O. Box 448 South Bend, IN 46624-0448		-	Medical Services			x	
							3,359.04
Account No. xxx6323			5/2001 Medical Services				
St. Joseph Community Hospital 215 W. Fourth St. Mishawaka, IN 46544		-				x	
							13.00
Account No. Representing: St. Joseph Community Hospital			Alliance One 1684 Woodlands Drive, Ste. 150 Maumee, OH 43537				
Account No.							
Sheet no1 of _1 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt			3,739.04
			(Report on Summary of So		ota lule		4,456.04

Form B6G (10/05)

In re	Judith Ellen Beagles		Case No.	
		Debtor	- '	

SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

American Family Insurance 302 N. Walbridge Ave. Madison, WI 53783-0001 **Homeowners Insurance Paid Monthly**

Form B6H (10/05)

In re	Judith Ellen Beagles	Case No	
_		, Debtor	

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Official Form 6I (10/06)

In re	Judith Ellen Beagles		Case No.	
		Debtor(s)		

SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child

filed, unless the spouses are separa	minor child. OR AND SPOUSE			
Debtor's Marital Status:	RELATIONSHIP(S):	AGE(S):		
Single	None.	AGE(S).		
Employment:	DEBTOR	SPOUSE		
Occupation				
Name of Employer	Retired			
How long employed				
Address of Employer				
INCOME: (Estimate of average	ge or projected monthly income at time case filed)	DEBTOR		SPOUSE
	y, and commissions (Prorate if not paid monthly)	\$ 0.00	\$	N/A
2. Estimate monthly overtime	,,,	\$ 0.00	\$	N/A
3. SUBTOTAL		\$	\$	N/A
4. LESS PAYROLL DEDUCT	TIONS			
a. Payroll taxes and socia		\$ 0.00	\$	N/A
b. Insurance		\$ 0.00	\$	N/A
c. Union dues		\$ 0.00	\$	N/A
d. Other (Specify):		\$ 0.00	\$	N/A
		\$ 0.00	\$	N/A
5. SUBTOTAL OF PAYROL	L DEDUCTIONS	\$0.00	\$	N/A
6. TOTAL NET MONTHLY	TAKE HOME PAY	\$0.00	\$	N/A
7. Regular income from operat	tion of business or profession or farm (Attach detailed statemen	ot) \$ 0.00	\$	N/A
8. Income from real property	•	\$ 0.00	\$	N/A
9. Interest and dividends		\$ 0.00	\$	N/A
10. Alimony, maintenance or s that of dependents listed a	support payments payable to the debtor for the debtor's use above	or \$ 0.00	\$	N/A
11. Social security or government	nent assistance			
(Specify): Social Secu	ırity	\$ 1,050.00	\$	N/A
		\$ 0.00	\$	N/A
12. Pension or retirement inco	me	\$ <u>927.18</u>	\$	N/A
13. Other monthly income				
(Specify):		\$ 0.00	\$	N/A
-		\$	\$	N/A
14. SUBTOTAL OF LINES 7	THROUGH 13	\$1,977.18_	\$	N/A
15. AVERAGE MONTHLY I	NCOME (Add amounts shown on lines 6 and 14)	\$	\$	N/A
	MONTHLY INCOME: (Combine column totals debtor repeat total reported on line 15)	\$	1,977.18	8

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Official Form 6J (10/06)

In re	Judith Ellen Beagles	C	Case No.
		Debtor(s)	

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comp	olete a separate	e schedule of
expenditures labeled "Spouse."		
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	0.00
a. Are real estate taxes included? Yes No _X_		
b. Is property insurance included? Yes No _X		
2. Utilities: a. Electricity and heating fuel	\$	150.00
b. Water and sewer	\$	0.00
c. Telephone	\$	30.00
d. Other	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	180.00
5. Clothing	\$	0.00
6. Laundry and dry cleaning	\$	0.00
7. Medical and dental expenses	\$	50.00
8. Transportation (not including car payments)	\$	0.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	90.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	0.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
d. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other	\$ 	0.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and	, \$	500.00
if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	1,977.18
b. Average monthly expenses from Line 18 above	\$	500.00
c. Monthly net income (a. minus b.)	\$	1,477.18

Official Form 6-Declaration. (10/06)

United States Bankruptcy Court Northern District of Indiana

In re	In re Judith Ellen Beagles					
		Debtor(s)	Chapter	13		
			•			

DECLARATION CONCERNING DEBTOR'S SCHEDULES

	DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR				
			and the foregoing summary and schedules, consisting of and that they are true and correct to the best of my		
Date	August 15, 2007	Signature	/s/ Judith Ellen Beagles Judith Ellen Beagles Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Official Form 7 (04/07)

United States Bankruptcy Court Northern District of Indiana

In re	Judith Ellen Beagles		Case No.	
	-	Debtor(s)	Chapter	13
	STATE	EMENT OF FINANCIAL AFFA	AIRS	
not a join proprieto activities	This statement is to be completed by every deuses is combined. If the case is filed under chant petition is filed, unless the spouses are separor, partner, family farmer, or self-employed prosess well as the individual's personal affairs. Do and the like to minor children by stating "a minor children by stating to the second service of the second second service of the second	apter 12 or chapter 13, a married debtor must rated and a joint petition is not filed. An indi ofessional, should provide the information re o not include the name or address of a minor	furnish information of the furnish information of the furnish	ation for both spouses whether or ngaged in business as a sole statement concerning all such itement. Indicate payments,
	Ouestions 1 - 18 are to be completed by all d	ebtors. Debtors that are or have been in busi	ness, as defined	below, also must complete

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE
\$19,380.00 2005 Wages from Mishawaka Utilities
\$8,400.00 YTD Social Security
\$7,417.44 YTD Retirement Income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$10,266.97 2006 Social Security

\$8,344.62 2006 Pension

\$11,601.00 2005 Social Security

\$6,094.80 2005 Pension

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF AMOUNT STILL NAME AND ADDRESS OF CREDITOR AMOUNT PAID OWING **PAYMENTS**

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR VALUE OF PAYMENTS/ AMOUNT STILL **TRANSFERS TRANSFERS** OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

2

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AND CASE NUMBER Wells Fargo Bank vs Judith Beagles

NATURE OF PROCEEDING **Foreclosure**

AND LOCATION St. Joseph Superior Court

COURT OR AGENCY

STATUS OR DISPOSITION

101 S. Main Street

Pendina

71D07-0505-MF-383

CAPTION OF SUIT

South Bend, IN 46601

3

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE. DESCRIPTION AND VALUE OF TRANSFER OR RETURN **PROPERTY**

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN

OF COURT CASE TITLE & NUMBER DATE OF **ORDER**

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION **RELATIONSHIP TO** DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

DATE OF PAYMENT, AMOUNT OF MONEY NAME AND ADDRESS NAME OF PAYOR IF OTHER OR DESCRIPTION AND VALUE OF PAYEE THAN DEBTOR OF PROPERTY Benedict F. Marnocha October 2006 \$2,000.00

310 W. McKinley, Suite 318 Mishawaka, IN 46545

Debra Voltz-Miller & Associates August 2007 \$1,000.00

1951 East Fox Street South Bend, IN 46613

Institute for Financial Literacy August 2007 \$50.00

P.O. Box 1842 Portland, ME 04104

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled None trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

AMOUNT OF MONEY OR DESCRIPTION AND DEVICE DATE(S) OF VALUE OF PROPERTY OR DEBTOR'S INTEREST

TRANSFER(S) IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION First Source Bank P. O. Box 1602 South Bend, IN 46634-1602

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE Checking xxxxxxxxxxx 6923

AMOUNT AND DATE OF SALE OR CLOSING

0.00

4

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

5

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

6

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

one c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER

OTHER TAXPAYER

I.D. NO. ADDRESS NATURE OF BUSINESS ENDING DATES

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY

DATE OF INVENTORY

INVENTORY SUPERVISOR

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE
NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 8

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date August 15, 2007

Signature /s/ Judith Ellen Beagles

Judith Ellen Beagles

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Best Case Bankruptcy

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United States Bankruptcy Court Northern District of Indiana

In re	Judith Ellen Be	agles		Case No.	
		-	Debtor(s)	Chapter	13
	DISC	CLOSURE OF COM	PENSATION OF ATTOR	NEY FOR DE	CBTOR(S)
	Pursuant to 11 U.S.C compensation paid to 1	C. § 329(a) and Bankruptc me within one year before the	by Rule 2016(b), I certify that I am ne filing of the petition in bankruptcy, ation of or in connection with the bank	the attorney for or agreed to be pai	the above-named debtor and tha d to me, for services rendered or to
	For legal services	, I have agreed to accept		\$	2,800.00
	Prior to the filing	of this statement I have rece	ived	\$	686.00
	Balance Due			\$	2,114.00
2.	The source of the comp	pensation paid to me was:			
	Debtor	☐ Other (specify):			
3.	The source of compens	sation to be paid to me is:			
	Debtor	☐ Other (specify):			
4.	■ I have not agreed t	to share the above-disclosed	compensation with any other person u	nless they are mem	bers and associates of my law firm.
			npensation with a person or persons when names of the people sharing in the c		
	 a. Analysis of the deb b. Preparation and fili c. Representation of the d. [Other provisions a Negotiation reaffirmation 	otor's financial situation, and ing of any petition, schedules the debtor at the meeting of c as needed]	to render legal service for all aspects or rendering advice to the debtor in deter s, statement of affairs and plan which re creditors and confirmation hearing, and s to reduce to market value; exer- cations as needed; preparation and in household goods.	mining whether to may be required; I any adjourned hea mption planning	file a petition in bankruptcy; rings thereof; preparation and filing of
			inimum fee of \$2800.00 minus so e Court, to be paid through the F		bove, plus additional fees of
6.	Representa		ed fee does not include the following say dischargeability actions, judic		es, relief from stay actions or
			CERTIFICATION		
	I certify that the forego		of any agreement or arrangement for p	ayment to me for re	epresentation of the debtor(s) in
Date			/s/ Debra Voltz-Mil	ler	
	<u> </u>		Debra Voltz-Miller Debra Voltz-Miller 1951 E. Fox St. South Bend, IN 460 (574) 289-1709 Fa	15590-71 & Associates 613	9

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF INDIANA

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Debra Voltz-Miller 15590-71	X	/s/ Debra Voltz-Miller	August 15, 2007
Printed Name of Attorney		Signature of Attorney	Date
Address:			
1951 E. Fox St.			
South Bend, IN 46613 (574) 289-1709			
Certificate I (We), the debtor(s), affirm that I (we) have received and			
Judith Ellen Beagles	X	/s/ Judith Ellen Beagles	August 15, 2007
Printed Name(s) of Debtor(s)		Signature of Debtor	Date
Case No. (if known)	X		
		Signature of Joint Debtor (if any)	Date

United States Bankruptcy Court Northern District of Indiana

	Northern District of Indiana								
In re	Judith Ellen Beagles		Case No.						
		Debtor(s)	Chapter	13					
	VERI	FICATION OF CREDITOR N	MATRIX						
he ab	ove-named Debtor hereby verifies th	nat the attached list of creditors is true and co	rrect to the best	of his/her knowledge.					
Date:	August 15, 2007	/s/ Judith Ellen Beagles							
		Judith Ellen Beagles							

Signature of Debtor

ADVANCE AMERICA 506 WEST MCKINLEY MISHAWAKA, IN 46545

ALLIANCE ONE 1684 WOODLANDS DRIVE, STE. 150 MAUMEE, OH 43537

ALLIED PHYSICIANS SURGERY CENTER 53990 CARMICHAEL DRIVE SUITE 100 SOUTH BEND, IN 46635

AMERICAN FAMILY INSURANCE 302 N. WALBRIDGE AVE. MADISON, WI 53783-0001

CASH IN A FLASH 501 W. MCKINLEY AVENUE MISHAWAKA, IN 46545

CBCS P.O. BOX 1615 GRAND RAPIDS, MI 49501

HOMEQ P.O. BOX 57621 JACKSONVILLE, FL 32241

INDIANA DEPARTMENT OF REVENUE BANKRUPTCY SECTION, ROOM N-203 100 N. SENATE AVENUE INDIANAPOLIS, IN 46204

INDIANA DEPARTMENT OF REVENUE BANKRUPTCY SECTION, ROOM N-203 100 N. SENATE AVENUE INDIANAPOLIS, IN 46204 INDIANA DEPARTMENT OF REVENUE BANKRUPTCY SECTION, ROOM N-203 100 N. SENATE AVENUE INDIANAPOLIS, IN 46204

KOHL'S C/O BANKRUPTCY DEPARTMENT P.O. BOX 740933 DALLAS, TX 75374

MICHIANA HEMATOLOGY-ONCOLOGY, PC P.O. BOX 448 SOUTH BEND, IN 46624-0448

NCO FINANCIAL SYSTEMS/55 P.O. BOX 13570 PHILADELPHIA, PA 19101

ST. JOSEPH COMMUNITY HOSPITAL 215 W. FOURTH ST. MISHAWAKA, IN 46544

ST. JOSEPH SUPERIOR COURT RE: 71D07-0505-MF-383 101 S. MAIN STREET SOUTH BEND, IN 46601

ST. JOSEPH SUPERIOR COURT RE: 71D01-0410-SC-13217 101 S. MAIN STREET SOUTH BEND, IN 46601

TODD BELANGER, ESQ. 111 MONUMENT CIRCLE, SUITE 3400 INDIANAPOLIS, IN 46204

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Form 22C (Chapter 13) (04/07)

In re	Judith Ellen Beagles	According to the calculations required by this statement:
	Debtor(s)	■ The applicable commitment period is 3 years.
Case Number:		☐ The applicable commitment period is 5 years.
	(If known)	☐ Disposable income is determined under § 1325(b)(3).
		■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part I	. R	EPORT OF	INCOME			
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.							
1	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.							
	b. 🗖	Married. Complete both Column A ("Debto	r's I	ncome") and Colu	umn B ("Spouse's Inco	me") for Lines 2-10).
		ures must reflect average monthly income rece					Column A	Column B
		dar months prior to filing the bankruptcy case, If the amount of monthly income varied durin					Debtor's	Spouse's
		n total by six, and enter the result on the appro					Income	Income
2	Gross	s wages, salary, tips, bonuses, overtime, c	comi	missions.		\$	0.00	\$
	and e	me from the operation of a business, profe nter the difference in the appropriate column(s Do not include any part of the operating of the ly	s) of	Line 3. Do not ente	er a number less than			
3				Debtor	Spouse			
	a.	Gross receipts	\$	0.00	\$			
	b.	Ordinary and necessary business expenses	\$	0.00	\$			
	C.	Business income	Sul	btract Line b from L	ine a	\$	0.00	\$
4	the a	s and other real property income. Subtract opropriate column(s) of Line 4. Do not enter a of the business expenses entered on Line	nun	nber less than zero.	Do not include any			
4	a.	Gross receipts	\$	0.00				
	b.	Ordinary and necessary operating expenses	\$	0.00				
	C.	Rent and other real property income	Sı	ubtract Line b from l	Line a	\$	0.00	\$
5	Inter	est, dividends, and royalties.				\$	0.00	\$
6	Pens	ion and retirement income.				\$	927.18	\$
7	expe	amounts paid by another person or entity, nses of the debtor or the debtor's depende clude amounts paid by the debtor's spouse.				\$	0.00	\$
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:							
		nployment compensation claimed to benefit under the Social Security Act Debtor	r \$	0.00 Spo	ouse \$	\$	0.00	\$
9	on a s Socia	me from all other sources. Specify source a separate page. Total and enter on Line 9. Do Security Act or payments received as a victim of international or domestic terrorism.	not	include any benefi war crime, crime a Debtor	ts received under the	ì		
	b.	\$		\$	\$	\$	0.00	\$
10		otal. Add Lines 2 thru 9 in Column A, and, if on B. Enter the total(s).	Colu	mn B is completed,	add Lines 2 through 9 in	\$	927.18	\$
11		I. If Column B has been completed, add Line 1 tal. If Column B has not been completed, enter				\$		927.18

	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD					
12	Enter the amount from Line 11	\$	927.18			
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents. Otherwise, enter zero.					
14	Subtract Line 13 from Line 12 and enter the result.	\$	927.18			
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$	11,126.16			
16	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
	a. Enter debtor's state of residence: IN b. Enter debtor's household size: 1	\$	38,765.00			
	Application of § 1325(b)(4). Check the applicable box and proceed as directed.					
17	■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable comryears" at the top of page 1 of this statement and continue with this statement.	mitmer	nt period is 3			
	☐ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable 5 years" at the top of page 1 of this statement and continue with this statement.	comm	itment period is			
Par	t III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABI	_E I	NCOME			
18	Enter the amount from Line 11.	\$	927.18			
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents. If you are unmarried or married and filing jointly with your spouse, enter zero.	\$	0.00			
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$	927.18			
21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number	Ψ				
21	12 and enter the result.	\$	11,126.16			
22	Applicable median family income. Enter the amount from Line 16.	\$	38,765.00			
	Application of § 1325(b)(3). Check the applicable box and proceed as directed.					
23	☐ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.	is det	ermined under			
	■ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable in determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do IV, V, or VI.					
	IV, V, OI VI.					

	Part IV. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)					
	Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)					
National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court).					

25B	Local Standards: housing and utilities; mortgage/rent e of the IRS Housing and Utilities Standards; mortgage/rent expense for y available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy cou Monthly Payments for any debts secured by your home, as stated in Lingesult in Line 25B. Do not enter an amount less than zero.	your county and family size (this information is irt); enter on Line b the total of the Average				
230	a. IRS Housing and Utilities Standards; mortgage/rent Expense	\$				
	b. Average Monthly Payment for any debts secured by your home,	Φ				
	if any, as stated in Line 47	\$				
	c. Net mortgage/rental expense	Subtract Line b from Line a.	\$			
26	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:					
	Local Standards: transportation; vehicle operation/publ You are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation.	·				
27	Check the number of vehicles for which you pay the operating expenses included as a contribution to your household expenses in Line 7.	or for which the operating expenses are				
	□ 0 □ 1 □ 2 or more.					
	Enter the amount from IRS Transportation Standards, Operating Costs 8	& Public Transportation Costs for the applicable				
	number of vehicles in the applicable Metropolitan Statistical Area or Cen					
	www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		\$			
	Local Standards: transportation ownership/lease expenvehicles for which you claim an ownership/lease expense. (You may not than two vehicles.) 1 2 or more.					
28	Enter, in Line a below, the amount of the IRS Transportation Standards www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Payments for any debts secured by Vehicle 1, as stated in Line 47; subtiline 28. Do not enter an amount less than zero.	Line b the total of the Average Monthly				
	a. IRS Transportation Standards, Ownership Costs, First Car	\$				
	Average Monthly Payment for any debts secured by Vehicle 1,	¢.				
	b. as stated in Line 47 c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	Φ.			
			\$			
	Local Standards: transportation ownership/lease expenyou checked the "2 or more" Box in Line 28.					
	Enter, in Line a below, the amount of the IRS Transportation Standards www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in					
29	Payments for any debts secured by Vehicle 2, as stated in Line 47; subtiline 29. Do not enter an amount less than zero.					
	a. IRS Transportation Standards, Ownership Costs, Second Car	\$				
	Average Monthly Payment for any debts secured by Vehicle 2,	\$				
	b. as stated in Line 47 c. Net ownership/lease expense for Vehicle 2	\$ Subtract Line b from Line a.	\$			
			Ψ			
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.					
31	Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll					
			\$			

22 term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. 3 Other Necessary Expenses, court-ordered payments. Enter the total monthly amount that you are reported to pay pursuant to court order, such as sposal or child support payments. Do not include payments on past due support obligations included in line 49. 34 Other Necessary Expenses, education for employment or for a physically or mentally challenged child. Enter the suital mentility amount that you actually expend for education that is a condition of mental properties of the following similar services is available. 35 Other Necessary Expenses: childcare. Enter the average monthly amount that you actually expend on childcare - such as tobay-alting, day care, nursery and preschot: Do not include other educational payments for health insurance listed in Line 39. 36 Other Necessary Expenses: health care. Inter the average monthly amount that you actually expend on health care expenses that are not reinbursed by insurance or paid by a health savings account. Do not include a payments for health insurance listed in Line 39. 37 Other Necessary Expenses: beauth care. Inter the average monthly amount that you actually pay for lefecommunication services other than your basic home telephone service -such as cell phones, pagers, call waiting, caller dispected professors. Do not include any amount previously deducted. 38 Total Expenses Allowed under 1RS Standardurs. Inter the fat or Lines 24 through 37. \$ Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24-37. \$ Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yoursely yoursely, your dependents in the following actegories. 40 Insurance and the properties of the care		Other Necessary Expenses: life insurance. Enter average monthly premiums that you actually pay for				
and the support obligations included in line 40. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. 35 Other Necessary Expenses: schildcare. Inter the average monthly amount that you actually expend on health care expenses that the care inter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include opayments for health insurance listed in Line 39. Other Necessary Expensess: telecommunication services. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include any evidence or that of your dependents. Do not include any evidence are well as a chally pay for telecommunication services other than your basis home telephone service - such as cell phones, pagers, call waiting, caller id, special long distance, or internst service-to the extent necessary for your health and welfare or that of your dependents. Do not include any expenses that you have listed in Lines 24-37. Health Insurance, Disability Insurance as a support of the payments is not total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. 29 In Health Insurance as a listed in Line 34. Continued contributions to the care of household or family members. Enter the actual monthly oppenses that you will continue to pay for five reasonable and necessary care and support of an	32	term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or				
Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Inter the total industry ensure that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. 35 Other Necessary Expenses: childcare. Enter the average monthly amount that you actually expend on childcare - such as baby sitting, day care, nursery and preschol. Do not include other educational payments. 36 Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or pald by a health savings account. Do not include any expenses: health care. 37 Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or pald by a health savings account. Do not include any expenses, call waiting, caller id. special long distance, or internet service to the extent necessary for your health and wolfare or that of your dependents. Do not include any amount previously deducted. 38 Total Expenses Allowed under IRS Standards. Enter the lotal of Lines 24 through 37. 39 Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24-37 39 Health Insurance Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spease, or your dependents in the following categories. 39 Leading the savings Account Savings Account Expenses. List and total categories. 30 Leading the savings Account Savings Account Expenses that you will continue to pay for the reasonable and necessary can ad support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for s	33	required	\$			
childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance listed in Line 39. Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually pay for telecommunication services other than your basic home telephone service - such as cell phones, pages, call waiting, caller id, special long distance, or internet service: on the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 38 Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. Subpart B: Additional Expense Deductions under § 707 (b) Note: Do not include any expenses that you have listed in Lines 24-37. Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. 39 Health Insurance b. Disability Insurance c. Health Savings Account Solve the Health Insurance b. Disability Insurance c. Health Savings Account Solve the resonable and necessary orare and support of an elderly, chronically ill, or disabled member of your thousehold or family members. Enter the actual monthly expenses that you will continue to pay for the resonable and necessary orare and support of an elderly, chronically ill, or disabled member of your flowed for member of your inmined that provide your disability into the service of the allowance specified by IRS Local standards for Housing of your family under the family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. 42 Standards for Housing and Utilities,	34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no				
Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on basic hard care dependents that are on treimbursed by insurance or paid by a health savings account. Do not include payments for health insurance listed in Line 39. Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually pay for leteommunication services other than your basic home telephones service - such as cell phones, pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 38 Total Expenses Allowed under LRS Standards. Enter the total of Lines 24 through 37. Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24-37. Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. 40 Disability Insurance \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	35	Other Necessary Expenses: childcare. Enter the average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.				
actually pay for telecommunication services other than your basic home telephone service - such as cell phones, pays, call waiting, caller dispectal long distance, or internet service to the extent necessary your health and welfare or that of your dependents. Do not include any amount previously deducted. 38 Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37. Subpart B: Additional Expense Deductions under § 707 (b) Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. 39	36	health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include				
Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. 39 a. Health Insurance b. Disability Insurance c. Health Savings Account s. Disability Insurance c. Health Savings Account s. Disability Insurance c. Health Savings Account s. Disability Insurance c. Health Savings Account so Disability Insurance c.	37	actually pay for telecommunication services other than your basic home telephone service - such as cell phones, pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and				
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. a Health Insurance \$	38	Total E	xpenses Allowed under IRS Standards	5. Enter the total of Lines 24 through 37.	\$	
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. a Health Insurance \$			Subpart B: Additional E:	xpense Deductions under § 707(b)		
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. A			•	•		
b. Disability Insurance c. Health Savings Account Total: Add Lines a, b, and c Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. 45 Continued charitable contributions. Enter the amount that you		Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following				
C. Health Savings Account Stotal: Add Lines a, b, and c Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptic court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the	39	a.	Health Insurance	\$		
Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances (This information is available at www.usdoj.gov/ust/or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charita		b.	Disability Insurance	\$		
Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a chari		C.	Health Savings Account	\$		
expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. So no not include payments listed in Line 34. Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(<u> </u>		Total: Add Lines a, b, and c	\$	
maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	40	expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.				
Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	41	maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal			\$	
you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	42	Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and				
expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Total Additional Expense Doductions under § 707(b). Enter the total of lines 30 through 45.	43	you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the				
Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	44	expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the				
46 Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	45					
	46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.			\$	

Subpart C: Deductions for Debt Payment						
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page.					
		Property Securing the Debt	60-month Average Payment			
	a.		\$			
			Total: Add Lines	\$		
48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.					
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount			
	a.		\$			
			Total: Add Lines	\$		
49	Payments on priority claims. Entailmony claims), divided by 60.	ter the total amount of all priority claims	s (including priority child support and	\$		
	Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.					
	a. Projected average monthly Chap	oter 13 plan payment.	\$			
50	b. Current multiplier for your distriction issued by the Executive Office for	ct as determined under schedules	x			
	c. Average monthly administrative	expense of Chapter 13 case	Total: Multiply Lines a and b	\$		
51	Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.					
Subpart D: Total Deductions Allowed under § 707(b)(2)						
52	2 Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 38, 46, and 51.					

Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)				
53	Total current monthly income. Enter the amount from Line 20.	\$		
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, included in Line 7, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.	\$		
55	Qualified retirement deductions. Enter the monthly average of (a) all contributions or wage deductions made to qualified retirement plans, as specified in § 541(b)(7) and (b) all repayments of loans from retirement plans, as specified in § 362(b)(19).			
56	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.	\$		
57	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, and 56 and enter the result.			
58	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 57 from Line 53 and enter the result.	\$		

59

Part VI. ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

Part VII. VERIFICATION						
60	I declare und must sign.)	er penalt <u>y</u> Date:	y of perjury that the information pro August 15, 2007		le and correct. (If this is a joint case, both debtors /s/ Judith Ellen Beagles Judith Ellen Beagles (Debtor)	